

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|---------|----------|
| | MA | | 06-21 |
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 43 | 6/28/01 |
| FORMALITY REVIEW | TD | Jr 1125 | 08/10/01 |
| RESPONSE FORMALITY REVIEW | CK | 1109 | 10-06-01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
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| Claim | Date |
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| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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9C-571
 6/2
 10-06-01